

GAC Medicaid Transition Day Services Work Group
1056 Woodbrook Conference Room, Dover
April 22, 2015 10 a.m. – 12 p.m.

Female speaker: Thank you.

[Phone dialing]

Female Speaker: Anybody hear anything?

Male Speaker: Hi anyone on the line?

Female Speaker: Hi Patina on the line.

Male Speaker: Hi Patina this is Brian and the rest of the work group.

Female Speaker: Hi.

Female Speaker: Okay we want to start with introductions. Suzanne New York of Delaware. We have our tents, TC Bell and Family family speaking up.

Gary Cassidy: Gary Cassidy Easter's Seals.

Lisa Furbur: Lisa Furbur, community legal aid.

Sybil White: Sybil White governor's advisory council for exceptional citizens.

Brian Friedman: Brian Friedman. University of Delaware center for disabilities studies.

John Mahon Chimes: John Mahon Chimes.

Teri Hancharick: Teri Hancharick- Chair of Governor's Advisory Council to DDDS

{ Unintelligible } : Developmental disabilities council

Female Speaker: And the co-chair.

: And the co-chair.

Female Speaker: Do we want to have people sitting around introduce themselves?

Female Speaker: Sure.

Male Speaker: Sure.

Kimberly Reinagel-Nietubicz: Kimberly Reinagel-Nietubicz with the office.

Lisa : Lisa .

Female Speaker: Do you mind speaking up? You're supposed to say your name.

{ Unintelligible} 1 minute 21 seconds

Female Speaker: Good job.

Shelly Neil: Hi, Shelly Neil DVDS day and transition services.

Suzanna: Okay a couple of additions that I have to the agenda. One is that we're going to have Teri at least talk about the e-mail she sent out this morning even though I believe that with the exception of TC we've already resolved that. The other thing is-- we tried to do say your name before you speak. This is Suzanna, and it's Katina and Brian doing the tool kit and the dissapid non-residential move to next week. Those are all the changes in the agenda. Does anyone else have any changes or additions? Apparently not. Would someone like to review the meeting rules just once? Sybil since you're new...

Sybil White: Yes. Okay, rules. Excuse me. This is Sybil White. Turn off your cell phones. One person speaks at a time. Start and end meetings on time. Be prepared and be present and stick to the agenda.

Suzanna: The transcripts-- this is Suzanna. The transcripts came out yesterday and was-- it was 34 pages long. I don't know that everyone had the opportunity to read it but for those of you who did, does anyone have any comments on the transcript from our meeting last week?

Gary: I guess it's a nice effort-- this is Gary-- its a nice effort but it's virtually useless in terms of minutes. You know it's just so massive and some of it's rather garbled as you might expect.

Sybil White: This is Sybil. I would concur that it's not that-- I was not present at the last meeting and I didn't feel like I got a good sense of what happened really from the transcript.

Teri Hancharick: This is Teri Hancharick. We talked a lot about that yesterday at the GAC meeting as to whether to continue with the recordings or do you know, I don't know who would do minutes if we could get a staff person to do minutes but I can-- you can take that back-- that Suzanna that if that's what the group decides that it's just not really worth wild.

Suzanna: I actually felt differently about it. I found it very beneficial, however because I-- this is Suzanna speaking, sorry. Because I got it late that was my only challenge with it was that it came so late that I couldn't really do much with it but I did find it informative although long. Does

anyone want to make a motion that we have someone take minutes? Does anyone want to do-- do we want to table this and see how it goes the second time?

TC: I say give it another shot. This is TC.

Katina: I think-- it's Katina, hi. I think let's give it another go around because that meeting was hard because we were still trying to set the tone for future meetings and I think now that we have a timeline and we're going to be talking about specific things in the meeting I wouldn't want to scrap it right away. Let's see now with the timeline and knowing what we're going to be presenting and talking and discussing in each of the future meetings let's see where it goes from there.

TC Bunk: I agree. This is TC Bunk.

Kimberly: This is Kimberly. I have a recommendation. What if there was someone, a volunteer from the group to go through it and kind of edit it and then they could possibly complete some thoughts a little better if someone had time to go through it and consolidate it a little more so it made sense.

Lisa: This is Lisa. I think that it would make more sense if we were going to ask someone to do that that we just have someone take some minutes. If we're going to continue with the recordings, continue with the recordings. Let them do whatever but take our own minutes that make more sense for us as the planning group. In other words, they'll be official minutes that will come from there. I don't know if we're allowed to do it that way but for our purposes so that it's not so wielyd and it's not another document to read or to have to go through again to make into smaller parts.

Suzanna: This is Suzanna. I would vote to table that until next week and see how the second minutes are; that would be my recommendation. If anyone-- where do you stand on that? Do you want to take a vote? What do you want to do? Let's take a vote. Okay? Right. Who would like to set up someone to take minutes now? Apparently no one.

Teri: Well this is Teri. I think it's tough unless we have someone designated for that. If you're part of the meeting it's tough to listen and try to be included and still take notes so we would have to set that up separately.

Suzanna: Right so-- this is Suzanna-- are we in agreement that we will table that until next week once the second set of transcripts come out? Is everyone-- everyone's nodding agreement.

Teri: Agreed.

Suzanna: Okay fine. The next new item is Teri's going to talk to us about what is-- what the governors advisory council would like us to do about substitute members.

Teri: And-- this is Teri Hansherick. That's another discussion we had yesterday was what to do about substitutes and I-- we thought that in the beginning it had been decided and maybe it hadn't been voted on but there would not be substitutes. Of course any one's welcome to come and be along the side, take your own minutes, bring them back to the person but the committee is what's here. I also-- the other thing was that for the public if they could wait till the end and then make sure that the chairs give them time for a couple of comments if they have public comment. If that's alright with everyone?

Suzanna: This is Suzanna. I'm in agreement with that.

{ Unintelligible }

Suzanna: So is everyone-- Suzanna speaking. Is everyone in agreement with the exception of TC?

[Group response] Yes.

Suzanna: Okay. I will put in future agendas a public comment on the agenda so that we all know that know that that's going to be happening. Up dates from DDDS, this is still Suzanna-- we had some questions from DDDS in our last meeting and while we went ahead and made our time line based on what we think would be the decision that we are involved in the entire process, in the absence of Marissa I was hoping maybe Teri could inform us about that. We had a difference of opinion about how long our involvement and just some of us-- some of us thought we were only creating an assessment tool. Some of us thought we would be involved in the self-assessments and the look behinds also.

Teri: And this is Terri-- and I don't think that has fully been decided who is going to be involved in the assessments and the look behinds. We also talked about that yesterday. We're developing the tool and the-- I'm getting old, I forget my words-- the evidence. Right-- and then there will be a conversation I believe with GAC and DDDS on who will-- we can always make recommendations if you'd like but that-- I don't think that's been decided yet.

Suzanna: Okay and do we have-- this is Suzanna-- do we have an expectation of when we might know that as we did create a timeline and we've put two weeks in to do those other pieces so we can get a lot more work done on the actual assessment tool if we're not working on that; so the sooner the better is what I'm saying.

Teri: Gotcha. So this is Teri-- so we meet the third Tuesday of every month so the third Tuesday of May or I can always email or call Jane and get the answer to that or we can talk about it.

Suzanna: As the chair of this committee I'm going to ask that you do that.

Teri: Sure.

Suzanna: Because we do have a very tight timeline and a lot of work to do and if the work does not include those things, we'll feel a little less pressured I think.

Teri: And so-- this is Teri-- do we have suggestions from the committee as to who we think should be doing-- one of my suggestions that I would like to see self advocates involved in the assessment.

Gary: This is Gary, excuse me. When you say the assessment, are you talking about the divider self assessment?

Teri: I'm sorry, the look behind.

Gary: Okay, for verification.

Teri: Yes.

Gary:

Suzanna: This is Suzanna. Gary I know that you had some thoughts about that last week.

Gary: Well Jane had started the discussion and the initial meeting in terms of-- and she made what sounded like a definitive statement from her point of view that as an example, providers would not be involved in the verification. I can tell you now that from the provider community we've got great concerns about that because the make up of this group was very carefully crafted in terms of what are presumed to people-- to be people's presets or philosophical points of view. You take the providers categorically out of the process we're essentially out of the process all together and just like CARF or other qualitative reviews providers never are in review of their own organization but they do participate in reviews of like organizations. One of the challenges you're going to run into is the people on your verification teams are likely not to understand what to ask, where to look for it, etc. because you're going to be blightly uninformed in a lot of cases in terms of how things work which creates a real problem in a quality assurance kind of role because sometimes people end up-- you know leave and with the assumption they didn't find something and that means ask and in reality they didn't ask the right question or they didn't ask the right person, etc. So we have great concerns about leaving the providers out of the verification process. It presents a very skewed approach to the whole process that appears to certainly favor certain presumptions in terms of philosophy.

John: This is John. I guess to add to that, my concern or our concern would be around that the providers deal with a very broad diversity of diagnosis's that come with it's own set of complexities that require programming that addresses those complexities and allows people to be successful and my concern would be that there would be someone or that there would not be someone involved in that self assessment proc--- or that assessment process that didn't have an understanding of what those complexities are and again what are considered the best practices in being able to provide those services. So certainly it would make sense not for us to be involved

in reviewing our own facilities. That would without a doubt be a conflict of interest, but the providers in this state who provide life services but to those diversity, that complexity I think would bring a piece to the puzzle or bring a piece to the conversation that would be able to ask more probing questions than might get asked and certainly would be able to address the issue of what something visually looks like versus what's actually occurring. So I would add my voice to that conversation.

Gary: This is Gary again. Additionally if we take the stance collectively that providers are ruled out, my understanding is that you're a provider, DDDS is a provider, University of Delaware is a provider, who's left? The Ark is a provider.

Teri: So this is Teri-- so what I'm hearing is that whatever team goes out you think that a provider should be on each team? That you feel it's very important that a provider be on each?

Gary: Yes.

Teri: And I will take that back.

Gary: Okay, appreciate it.

Teri: Thank you.

Suzanna: Okay if no one-- This is Suzanna-- okay if no one objects, Katina and Brian have requested that they go first because Katina is only available until eleven. So does anyone object to them presenting about the tool kit now?

Gary: Katina always wants to go first.

[Group laughter]

Katina: That's not funny. I'm not in the room to defend myself.

[Group laughter]

Gary: Perfect.

Female Speaker: Okay Katina.

Male Speaker: Okay, you guys are on.

Brian: So this is Brian. You guys can see on the screen what Katina and I did was we went from the home and community based setting, basic element review tool for state wise transition plans. That's this document and I certainly have no problem if I-- you know I sent it to Lisa because that was our agreement last week but I have no problem circulating the document we created

electronically. I didn't want to kill trees by making copies necessarily for everybody if they weren't going to use it but I have no problem circulating this. So this is a-- this was not a state specific assessment that was created but rather questions that I think my understanding was put together by CDS to sort of help guide states and so there was-- much of this document did not pertain to the kinds of questions we needed to look at so if you do happen to have this document in front of you the questions that we looked at really centered around pages 9-13 and among those questions from pages 9-13 there were several questions that seemed to only pertain to residential settings and so you know we made the recommendation obviously where as that only seems to pertain very clearly pertaining to residential settings would not be included. So it's specifically about residential-- questions about a place where someone was living. However there were a couple of-- there was one question in particular that we felt that could be applied to daytime settings, specifically work settings and so you'll see that within our recommendations. That questions listed with some suggested rewording or application that no body had at their sites. The other thing that we had talked about last week was the-- that we were thinking about the idea of creating core questions that would apply to all different types of day services including data, pre-vocational services, support and employment in group supported employment and then perhaps coming up with a sub-set of questions that might pertain to each individual service. So this was the-- that was how Katina and I were thinking as we went into the document but both of us separately reached the conclusion that really from our perspective all questions could be applied to all of those settings and so we're happy to talk that through.

Suzanna: This is Suzanna. I think that's worth a discussion as everyone may not agree with that. I happen to agree with that. I don't know -- does anyone else have any feelings about whether or not we change our strategy of having core questions at the beginning and then drilling down into each waver?

Brian: Well and this is Brian-- just to clarify, so I was just suggesting, this is the -- that was the conclusion that Katina and I arrived at and was a recommendation we were going to bring back but certainly not suggesting that we don't-- our conclusion is certainly the overriding one.

Suzanna: This is Suzanna-- once again, Gary, does anyone else have any thoughts on that?

Gary: This is Gary. Having gone through the same thing I can sort of see it both ways. You're going to have some items-- and you've allowed for a not applicable.

Brian: Right.

Gary: That being the case, there's probably no harm in having all of the questions if you will applied across the board because if it's not germane you would cite not applicable. Such as, for individual support of employment if the question is "are you located next to a state institution?" its a moot point because it's individual supported employment and the person's employed where they are employed by the employer. The physical setting and location is a moot point so it would be not applicable. So I think that's an illustration why it doesn't matter. Your answer, as long as the response is tailored to allow that flexibility. Some of the tools categorically were a yes and no

and it would be a quagmire if we're left with only yes and no.

Brian: Right and so to that point, Katina and I were thinking along the same lines that yes, no and not applicable made sense. We included on this document all of the response choices that were in here although at the top you'll see a bullet point where we both felt like the idea of answering a response as partially was going to be problematic because it was-- it just leaves itself so much to interpretation that you know the answer yes or no would then be explained with whatever evidence was being -- or not applicable was going to-- by ensuring the person is offering evidence that would allow the person to explain why they think that was yes, no, or not applicable. To allow for a partial response is-- could really in our opinion serve to muddy the waters and Katina will jump in if she's in disagreement with any thing that I'm saying.

Katina: I'm not in disagreement. I have you guys on mute because I am driving so I don't want you get a lot of feedback but you know I worked a lot with that partial as well. We had a lot of discussion about it because they think it ultimately for a lot of things is going to be yes, no. What I would like to see is that comment piece in this for when we get to that point so when we're looking at verification of the yes/no's we're able to provide some feedback.

TC Bunk: This is TC- Bunk. I'm sitting here thinking about the pre-vocational that I'm sure a lot of those questions will have to be more adventitious now because of the settings that they're in they'll need-- I'm wondering how different those questions would have to be versus these one on one employment and the group subject.

John: This is John. There's another component to this which we're going to talk about at some point which is where the plan fits in to this but somebody last week and I don't remember who, had made the recommendation that in addressing those sort of things, as the delivery of service is community based and is being driven by the plan that they would have a-- on there would be a set up similar to a drop box which would allow you then to-- if it was a-- I was thinking in terms of if it was a no, but even if it was a partial it would move you over into being able to ask specific questions about the individuals plan that determines why they're receiving the service, where the service is located, what the outcomes are that are attached to that service are revolving around that plan. So I think if you had that piece there you would be able to answer those questions and that was a recommendation with again -- I thought the drop box idea was a good idea.

Brian: Yeah this is Brian-- I think that was Angie that brought that up last week and so I think what we were thinking about -- and we talked about that drop box idea yesterday too and so I think you know in that case I could see the answer being no, right? And then the drop box would go over and you could explain the no.

John: Exactly.

Brian: But to call it partial I think again just so that creates even more ambiguity around an assessment process that's open and lending itself to ambiguity.

Gary: This is Gary and again having gone through the same process looking at somebody else's tool the suggested response set that I came up with is a little different and might address the challenge. I suggested that what appears as yes meaning compliance in a lot of these tools, my suggestion is that be defined as substantially in compliance. Meaning that in general the setting as it's intended, practices in accordance with that standard or that philosophical notion, that allows for some individual deviations as they're referred to in the Delaware plan, but the reviews are not intended to look at every individual in the setting. It's what the general practice is, the environment of that service setting. So I'm proposing that a yes means substantially in compliance which means it's not 100%. There may be individually based as in individual plan deviations you know, as John's suggesting, but if you think in terms of the providers and the assessment having to list every individual's issues and treatment options as proof of compliance is I think wrong thinking in terms of this process because we're looking at the service setting. We're not looking at each individual's services.

John: This is John. I think the service setting though is defined by the service that the individual is receiving. I think if we disregard that exception that we will have people that clearly fit into that no category because of the support systems they need to have in order to be within the community. So I think if we don't do that-- I mean if you're going to get a yes you're probably not going to go to that drop box anyway okay? It's going to be apparently obviously that that fits, but if it's going to be checked off by the setting or the definition of the setting with a note, if that doesn't get further defined, in fact somebody may be employed, may be successfully employed, may be working but the support system they need to have to ensure their continued employment, if that isn't recognized then it may not be seen as community based. So again I think that if we don't have that box up or that check off system there's a very large population that would be disenfranchised.

Gary: Right. This is Gary. I agree, but I think both concepts can be incorporated in the same response set. Yes can mean substantially in compliance which isn't 100% of the individuals because recognizing that there are deviations. No would mean that it's predominantly not in compliance which draws down the check box where you site the individual plan features that necessitate those reasons.

[Talking over each other]

John: Sorry, I kind of understand. What we're really saying is that both these components are in the self assessment or in the follow along that will verify what this self assessment says.

Gary: Right.

TC Bunk- This is TC Bunk. It has to be that way because like you said we're going to be cheating something.

Lisa: This is Lisa. So some of the discussion of what I'm hearing keeping in mind that we're

creating the survey instrument, is almost that we want to define what yes means. So in our survey instrument we'll have a short instruction section or a definition section that might say, "Yes means substantially in compliance. Substantially in compliance means...This".

Gary: Right. This is Gary. You'll note that in most of the documents that we've seen there's reference to the primary documentation being in the form of agency policies. Policies set forth the environment in which services are provided allowing for individual plan exceptions to those provisions. So exactly that and you will see if we get to it in the one I did, I actually did suggest an operating definition for what yes means and so-- but those mechanics of the ratings really become critical as you think through these issues because nothing's a clear-- almost nothing's clearly black and white.

Suzanna: This is Suzanna. You want to go on Brian?

Brian: Sure. The only other point was I mentioned that many think that you'll see the strike through the original language that we suggested is applicable to the settings that we're talking about in this core piece. So I don't know what's helpful for me to read through. The questions are for people to look through them and I suspect that there's-- well I know there's a lot of similarity across some of these different assessments that are what's exercise here but we certainly felt like there were-- I think there were 10 questions total that seemed applicable to the settings that we're talking about.

Suzanna: This is Suzanna. One of the things that I noticed and I can't reference which assessment it was where they actually put in there in strategic places person centered. So it tied back to the person in most cases and I'm not seeing that on here although...

Brian: Actually, so I apologize. This is Brian. I'm noticing an error in there and so number seven is not actually-- was not meant to be copies on there so that was a mistake and I apologize for that.

Female Speaker: Do you want me to take it off?

Katina: Hi, this is Katina. In the document that we wanna try, I have to tell you it's been talked a lot about cost and effect. We know very much. [Breaking up]

John: You're breaking up.

Suzanna: Katina, this is Suzanna. I don't think we heard the last part of what you said.

Katina: Sorry. In the tool kit that we looked at it really didn't pull out like person specific language but we started to interpret it as person specific party. It actually talked a lot about, and Brian I can't remember the exact phrase that the-- for the provider language. It was referencing residential those types of things and then it used setting and we started to talk more about a fireman and location. So it would be I think closer to a person centered question.

Brian: Yeah this is Brian. So the majority of the questions consistently reference the setting and it was-- as Katina was saying it was not language within this at least that we saw that was around a persons...I mean having language that is specific to person centered makes sense in many ways although that was not a part of this document. This document was more about the-- what the setting is allowing for in terms of the kind of services the person is receiving and the amount of choice that they have within that setting.

Suzanna: And this is Suzanna-- do we not feel that the individuals plan drives all of that?

Brian: Well sure but we were tasked with looking at this specific assessment.

Suzanna: Right.

Brian: So that was all that we...

Suzanna: Sorry.

Brian: I was presenting on-- this is Brian-- I assumed that we would talk through each of these different assessments and then sort of summarize and look at that, but I mean if you want to do differently we can talk that through about how--

Suzanna: This is Suzanna. No, I think just going through all of this and then we're going to actually begin to collate what we think should be in there.

Brian: Sure, but you know I think our understanding of this tool is that you know, that this tool gets that the general intent of the ruling and certainly a person centered plan is going to ultimately drive the kind of services you're receiving but in terms of what the setting is allowing for other kinds of services that are getting created within the settings that these communicate-- these questions were sort of getting to the intent behind the rule. That these are things that these settings are supposed to create.

Teri: This is Teri and I think the person centered plan is a separate document. There will be person centered plan for everyone also, but like Brian said we are assessing the settings and we can also put a parking lot up there if there are things that we want to discuss later. I notice we didn't have one. If we wanna do a parking lot and things...

Suzanna: This is Suzanna and we had talked about doing that-- well with evidence information but certainly anything could go in there.

Gary: This is Gary. We've got a-- we're going to end up with a long list of potentially applicable questions or standards and many of them are essentially the same just differences in wording. I would suggest that we end up with a exhaustive list of the ones that we think are applicable and then someone can take on the task of shrinking it where there are duplications or you know very

similar issues and then we can go through a process in terms of pairing it down to a manageable size because we're going to-- you know at the end of the day there's going to have to be attention paid to keeping this as simple as possible or it's going to end up being a gargantuan process for everybody. You'll notice there's quite a range in the tools that we've seen. Some of them are amazingly brief and some of them are-- go on ad nauseam. So we're going to have to decide you know what we think is manageable but I would suggest we keep everything on the list initially in terms of what's applicable and then pair it down afterwards.

Brian: This is Brian and I think that's our task actually the next two weeks. We've kind of allowed ourselves that to sort of go through and...

Suzanna: This is Suzanna. On our timeline we were going to collate all the questions next week. I don't think we'll be ready for that. I think we do need to weeks and on May 6th we were going to establish the core questions so I think we actually have two weeks to really get them all out there and then narrow them down to which ones we want.

Gary: We're going to have an increasing challenge as we get more and more instruments coming in while we're in process. At some point we're going to have to cut it off.

John: Hi, this is John. I'm sorry.

Lisa: This is Lisa. So that's actually what I was hoping or what I thought we had agreed to that I volunteered to do after people assessed the groups assessed the tools that we had and make recommendations and if the group will tell me what-- if they're in agreement with these questions some of the questions, all the questions, then I'll remove from Brian's document, put it on our parking lot for potential questions for our survey instrument and then as Gary suggested I will try to between now and next week put the like questions together and I'll distribute it and then we'll just continue running until we get all the questions, we've looked at as many as we need and then we can start you know revising, deleting, whatever works kinda thing.

John: This is John. This may be a little distracted but I just wanted to make the point that as we look at some of the states and what they're doing or what they're not doing I think we should be mindful that what we're trying to do is create the Delaware plan, not the Tennessee plan or the Pennsylvania plan. From what I've seen and I'm going stir crazy looking at so many plans that really say nothing and then I recently found out that many of these plans are also works in progress as well so I think we should be mindful that in the end regardless of what we look at that what we're trying to create here is the assessment tool that fits what happens within this state. Jane had made reference to this and I think there's some truth to it that in many ways we may be ahead in terms of what Medicaid is requiring and I don't think we should get ahead of ourselves and keep it simple. I don't think we should get ourselves too caught up in what the other states are doing; take what we need but let's pay attention to what we've got here. I don't mean to get off the subject but I...

Gary: Sorry, maybe .

[Group laughing]

John: I'm going to go look. I'm going to have them check it but let's try to stay focused on what we want to do here.

Teri: This is Teri and I think we do have to keep in mind that we're making our recommendations. These are all going to go to Medicaid. We're only making the recommendations.

TC Bunk: This is TC Bunk and I have a quick question. You might have already talked about this and I wasn't here. When we're doing these assessments for employment are we doing the provider and the individual and then the settings? Are we doing the different assessments like one of these; that one is South Dakota. I know we're doing our own thing but are we just-- is that how it's going to work? Like the staff has an assessment, the individual has an assessment and the self assessment? I'm looking at this one, there's different ones. I didn't know whether we're just doing--

Suzanna: This is Suzanna. I don't think that questions been answered. I don't think that-- and I think someone's going to answer that for us, I don't think that's going to be our decision. Am I correct on that Teri?

Teri: This is Teri. Are we assessing all-- we're not assessing community employment, correct? We are assessing...

Suzanna: Support employment. Yes. This is Suzanna. That was our direction that we were doing all four of them. If we get different direction we'll obviously...

Brian: This is Brian and to answer this question I think were you in part also asking-- because there's multiple assessments that would occur; the self assessment done by the providers and then some additional work that's done with individual clients from those providers. Were you asking if we're developing the assessment for each of those groups?

TC Bunk: This is TC. I guess my head is still spinning because I'm looking and I'm thinking all these questions are going to be answered by the-- say Elwyn, okay, the staff and then are there other questions or am I jumping ahead? I don't want to waste time here.

Brian: My understanding is that we were tasked with coming up with the self assessment that providers would be conducting.

TC Bunk: And that's it?

Brian: And that's it is my understanding.

TC Bunk: Okay.

Suzanna: This is Suzanna. I apologize and maybe Lisa could do this. I meant to say at the beginning what is our goal for this committee and to be reminded of that and that is essentially it to come up with recommendations for a self assessment for providers.

TC Bunk: Just for providers? Okay.

Suzanna: And we still have not determined and Teri is going to look into that whether or not we're looking at the evidential information and the-- working on it. We're not sure if we're involved in that piece of it or not so I think we always need to keep that in mind.

Female Speaker: Not just get confused also, but all the different states. Okay.

Teri: I think they are involved, this is Teri, in the evidential information. That was clear.

Gary: I agree because as you look at tools it's obvious that virtually all of them are embedding how you document your compliance on every item I guess unless it's a throw away, you know like are you -- does your facility straddle a railroad track. [Laughing]

Suzanna: This is Suzanna. Brian are you and Katina finished?

[Group laughing]

Brian: I think so. This is Brian. I think so. Katina are we finished for now?

Male Speaker: I think Katina is finished.

Female Speaker: Katina left.

Male Speaker: We hope that's a good sign.

Brian: Yeah that's fine I think we can-- I'm fine with it.

Suzanna: John?

John: Okay let me start with my apologies because I did not send this to Lisa and I'm sorry for that but unfortunately I ran out of time however as I understood the task I was charged to take a look at the person centered planning process from Medicaid and just draw the line between that and what is required. This I think came out of the conversation that started a few minutes ago about the person centered planning being the driver for the service that's delivered. This will be relatively quick I think. Suzanna had sent out yesterday to everybody and if you don't have copies of this I will get copies to you but a year or so ago, actually April of 2014 DDS had started to meet with us to develop the service guidelines and billing guidelines that were required

for the services as they were defined at that time and I think the connection to the person centered planning as being the tool is if you'll look under the prevocational services it's clearly stated in employment first act of 2012 what needs to be in place for an individual to be receiving employment services and the information I think that they're asking for within that is clearly developed in those four points there in terms of the documentation required to prove that the person centered planning is actually occurring. The Medicaid-- I got papers all over the place-- the Medicaid piece that Suzanne had distributed last week also-- and I'm looking for some feedback on this but as I read that-- went through that Medicaid definition I really didn't find anything in there that would contradict how person centered planning works or in fact that its not occurring. So if you take the Medicaid as defined-- I'm sorry yeah, the Medicaid definition of person centered planning you draw a line between that and the service guidelines that were provided a year ago and then finally-- I will give this out because I know -- if you could pass these around and you can call this document B or C or whatever you want. In the January 2015, after our focus piece came out I did the work from CMS that came out, the regulatory requirements, on that page both sides you will see that the regulatory requirements for home and community studies indicates that it's based on the needs of the individual as indicated in the person centered plan. If you go down to the second point, it again identifies the setting options are identified and documented in the person centered service plan and are based on individual needs, preferences and for residential settings although I do believe that this is applicable to the day services; resources that I would categorize as resources available for them to receive the services that they need and then the-- two more points down it facilitates individual choice regarding services and supports and who provides them. Then on the other side of the page, point number six, and this is-- this I think addresses the issue of the individual plan that provides for those individuals who would be receiving a service, would be successful in that service but may require something that may not fit into the general definition of communitive aids because it basically states any modification of additional conditions specified in items one through four must be supported by a specific assessed need and justified in the person centered plan. I believe that-- this piece-- I'm sorry. I'm so sorry. I believe this provides the regulatory basis for the usage of the person centered plan as the driver for how the person receives the service and in what setting they receive that service. I'll just leave it with this and then we can talk about this. I will give you an example-- a very specific example. Obviously not the majority of people but certainly the example at work that I have several individuals within our program that are not only diagnosed with IDB but also have issues as sexual predators. They have one on one support systems. They currently work. They have jobs, but they also have -- by the way I should tell you they're not adjudicated so there's no court order that says we have to do this but in the process with them one on one they are also-- there are guidelines in place before they use the bathroom, the amount of time they can stay within the bathroom and then when they have to return to work. That not only keeps them safe because god forbid they would be arrested and end up in the criminal justice system but it also keeps the community safe. I will tell you these are individuals who've had their jobs for 10 years and without these support systems in place clearly something catastrophic could occur. I would suggest to you that the person centered plan that allows for this to occur is what I believe would reinforce the fact that these folks are not only employed but they're actually in community based programs. So I believe that it's terribly important that as we look at what we're doing here, that in fact we have this process in place so that again as I said

earlier no body is disenfranchised from the opportunity to be able to receive the services that they need to receive. As I said, I was going to keep this one short for a change.

Suzanna: This is Suzanna. I think that's what I like-- the language of person centered plan in most of the questions because it accounts for both cases. It makes sure that the person who really has desires for a particular setting, those desires are understood and being met and also ensures the safety and security of other individuals within the plan. So I'm very in favor of that for everyone. You know, that's my personal preference.

Gary: This is Gary. I understand where you're going but I think there's a little bit of challenge in the logic of that because you're setting forth that, and what you're referring to John, individual deviations from the settings rule should be the primary lens through which we look at everybody. I propose that it should be the opposite that the general assumption should be that you're in compliance with the setting rule, but still allowing for deviations and that's the terminology that's used in the state plan. Deviations that are individually supported by their essential life styles plan. I think it's the case in some of your programs because you have a sort of very specific sub-population in some cases that your program could categorically be in the situation where it's a deviation program such that your program is substantially in compliance because all of your members or constituents in that program have documented deviations in their EoP's but I think if you -- the way you're proposing it that the whole process is defined by looking at everybody's EoP's would drive us to an individual consumer oriented assessment and that's not the intent of the settings rule. I think it's sort of flip sides of the same issue.

John: So what you're suggesting is that the person centered-- that within this setting rule itself that there be an ability to accommodate those needs and that the person specific plan is what drives that accommodation. For instance if you were to ask some important questions because what we did with this is we sat down and we went through 350 people and as we went through these 300 people if you just did a yes/no, almost 60% of our people would not be within setting yet they're working okay? And the supports they receive are different than are what the visual may provide. So as we go through that what I'm suggesting is, is that within the assessment tool itself that something that is driven by-- if you get a no that it's driven by the need to look at the individual to see that the service they're getting actually meets the requirement. That's really what I'm saying.

Gary: It could be a no but I'm the -- I think the challenge as we look at such a-- you know it's only Delaware but still it's a large system in terms of number of settings we need to focus on the assumption that going in that settings will be in compliance so that we don't drive the process to looking at every individual consumer's EoP. We don't need to look at the EoP unless it's a deviation from the standard. So I think I'm in agreement with you, it would be a no/but and your but is that the restriction if you will is necessitated according to the EoP and that's your justification for not being in compliance which means you get a pass on that standard.

Brian: Yeah this is Brian. I tend to agree with Gary and I think that-- I think that my understanding of the rule is the initial lens to which we should be examining settings and

services people are receiving is that it's through what's outlined in the rule in terms of the kind of setting that it is and then there will be accommodations made for those individuals that require more significant supports that will be based upon their person centered plan but that we're not necessarily starting by looking at each individual but rather we're starting with a system of supports that we are offering the settings where those are being offered and then there will be those no buts.

TC Bunk: This is TC, that's what-- so I guess that's what CMS is all about. They want to know what the settings are and then we have to address why the settings that may not-- you know they might not be in agreement with, that's why we have them for individuals. I guess I'm saying the CMS, they're looking for these questions have to be about the settings and then the-- even though we're saying and I agree that it should be equal that the person centered plan and the settings but I guess with this we have to start with the settings and just kind of...

Brian: Yes, and this is Brian. I can see two different kinds of questions that would you know-- I think would-- could potentially provide the same things but I think has some different potential ramifications. You could have a question that says-- I'll use an example from this document. So the setting ensures an individuals right by privacy, dignity, respect, and freedom from coercion and restraint unless otherwise specified in the person centered plan or the question-- or you could have that question as written and then the box might be checked no and then there would need to be a justification as to why that isn't being done and in some cases that might be the case but I think it--I dunno I think it has a different meaning behind it. I think it lends itself to a true sort of understanding of the settings that we're creating and the services that we're offering and that's not a judgment on any one service.

TC Bunk: Well like you said we have to justify why we-- why they're and a particular setting because there is no yes and no.

Gary: But then the justification is the person centered plan.

TC Bunk: Exactly so we always go back to that no matter what.

Suzanna: I'm sorry I think-- this is Suzanna-- this is a question for Brian and how you and Katina set things up there was always an explain.

Brian: Oh yeah. So the yes's explain and the no's explain.

Suzanna: And that's kind of Gary's "but" and it does lead to the person centered plan so I'm okay with that. I'm actually okay with that as far as it doesn't have to-- the actual question doesn't have to include the person centered plan as long as if it is a no it drives to that.

Lisa: This is Lisa. It sounds to me like what we're talking about in regard to the person centered plan is that would be the evidence or part of the evidence that would support the answer to the question.

Gary: If its a deviation.

Lisa: Correct.

Gary: Right, right.

Lisa: But that's what I think that we're struggling with. What I'm hearing is we're in agreement we're just not putting it maybe in the right frame.

Brian: This is Brian. I also wanted to-- and I apologize if this comes across as overly blunt but John used the term disenfranchised a couple of times and I think this group has done a great job at avoiding terminology and conversations that sort of break us off into different categories so far and I do want to be careful because I could see somebody who has a different perspective using that same term to apply to different groups in a different sort of way and so I just want to caution us about using that kind of terminology that-- where we run the risk of breaking us up into different case specific groups.

[Talking over each other then laughing]

Suzanna: This is Suzanna. Thank you for that Brian and I think we talked about that earlier that this group's work is not to debate the philosophy of it. Our work is to come up with an assessment tool and so I think Brian is simply supporting that and I think we got a lot of work done last week and will continue to do and I think that's our marching order that keeps us on task very well. So the occasional slip up of a word should not be--

Male Speaker: Sure.

Brian: Well-- and this is Brian-- we all obviously come to this with different perspectives and different ideas and you know I think that it's going to naturally come out and so I think it's just important for the group to just sort of be cautious when we do seem-- when that seems to start to rise up because we can quickly dissolve the good work the group is doing.

Suzanna: Okay. Do we-- are you finished John. This is Suzanna. Gary, you wanna...?

Male Speaker: Nope.

[Laughing]

Suzanna: Do you want to explain your information that you provided to us?

Gary: Okay. If I got the right documents, and we labeled some of them as states and I couldn't find any reference in the documents to the states so I'm not sure I'm on the right page.

Suzanna: You are.

Gary: Okay. That's a miracle. Okay South Dakota and Pennsylvania who would have thought we'd go to South Dakota as a presumed leader in human services? I did very much the same thing that Katina and Brian did just probably didn't do as good a job at it. So I started with South Dakota and then went to Pennsylvania and then all the way at the end of what I sent in was some suggestions about that response set issue that we've been kicking around. So basically I tried to pull out the ones that seemed like they could be applicable to day settings because again the tools we are looking at were predominantly residential. So in the one that's just going by, we would replace the listing of residential settings with the flavors of day services that we have you know in describing what the setting is that's being looked at and there's a laundry list of the very literal questions that we've seen in virtually every instrument. One that I find interesting is "does the setting restrict visitors?" Keeping in mind that this comes from a residential questionnaire. I am a bit stimey into giving that for the last 25 years I've been involved in running day services. The question of visitors doesn't seem terribly germane so I'm having a hard time putting that into perspective but nonetheless that's the question. So I think some of those we're going to have to refine a little bit because there's an imbedded expectation that essentially these are being set forth as standards of service for these different settings and I don't know what the heck the do with that one because if we did allow visitors we would be subject to all kinds of security issues, confidentiality, everything else. So basically I took the approach of pulling out and throwing in anything that seems like it could be applicable without exerting any undo you know preference or discrimination in terms of which ones I pulled out. So I think that's one we're going to have to work on a little bit, but the others are lifted straight out of South Dakota and then Pennsylvania. It's interesting as much concern we've heard about the Pennsylvania assessment South Dakota's has a heck of a lot more detail in it than Pennsylvania. Pennsylvania has a bunch of bureaucratic gobble-de-gook about how many people you serve of this color and that size and stuff like that and nothing to do with the settings questions and then they don't really have that many standards related questions. South Dakota has a lot more of the questions. Like Brian and Katina did, number five, the original reference was "Has the residence been modified?" we would supplant that with service setting. So like Brian and Katina saw there are some easy fixes to adapt some of the residential questions to day services but I assume we're not really going over the items so these are just offered up for the longer list.

Suzanna: This is Suzanna. Lisa are you going to try to bring these lists together for next week?

Lisa: Yes, I'll do that for next week.

Brian: And this is Brian, so I apologize if I didn't clarify this earlier. There were certainly some questions on the instrument we looked at that just didn't seem to apply to day services like visitors and for that reason we actually left it off of our list. That was how we dealt with it, we just went ahead and made the recommendation that you know, it didn't fall under.

Gary: Right. There are some interesting ones like are there cameras present in the facility. I've often said that I can see us getting to the day where there are cameras everywhere, even in

privacy areas because we're at such risk and our staff are at such risk as well as the service recipients but I don't think it's come to that yet but it probably has in some places.

John: This is John. With regard to the question that Gary had, you could substitute some of the industrial standards. There are for instance, we have people working in DuPont and I can't get into DuPont unless I sign in, I've got my badge, they take my picture. I mean there's a whole series of things for me to get onto the DuPont plant just to see folks so there are industrial standards in place that deal with security issues and things such as that which I think you know would be applicable to some of the things-- some of the settings that we have. So that may be somewhat workable.

Suzanna: This is Suzanna. A lot of the plans have a phrase that says the same as people not receiving a Medicaid waiver and so that really applies to that although one thing I took objection to was in several of them can the individuals set their own hours, work hours, and I thought who could do that? Why would that be in there? That was really-- I hope they don't put that in.

Lisa: This is Lisa. I could see a way to rephrase that question so that it expressed whether the individual had the opportunity to say "I can't work on Tuesday because I have a doctor's appointment." That's setting your own hours or could be perceived.

Brian: Well in the process of finding employment rights, so through the job development process that person's had the opportunity to say "Hey I do much better working in the afternoons. I am not a morning person. So my preference is to find a job in the afternoon." Now of course, we don't know it whether that pans out is another thing but that that is taken to account that those preferences are-- there's the opportunity for them to voice that preference, I think that is important. This is Brian. I forgot to say it.

[Laughing]

Gary: Now we're into Pennsylvania and again a lot of these are seen in every one of the tools so you know some of these are throw always frankly. You know like if you're in an ICF providing a service, etc. but some of them are certainly germane like privacy for you know using the bathroom and changing your clothes, etc.

Female Speaker:

Gary: Yeah.

Suzanna: This is Suzanna. Is that something that we want to discuss whether or not that's going to be in-- I mean obviously it's in everything about visitors. Are we going to-- I guess as we've collated all the information we can debate that whether or not we want that in the assessment, in our recommendation for the assessment.

Gary: This is Gary. I think it clearly makes sense in terms of residential settings because there is

so much emphasis on it being the individuals home not the agency's home but for day services the standard has usually been-- is that what happens in either-- even though it's not age appropriate, schools or a workplace and I guess for adults, school like university when you're in class, do you have visitors? No. So you know I think that's what it's framed by.

TC Bunk: Obviously in emergency situations you can get away with it but not on a regular basis. This is TC by the way.

Teri: This is Teri. Yeah this is confusing me. I think there are visitors sometimes when you're at work. You do have family come in and I think especially in the day program I think family especially should be able to come in when they want to and check on whoever's there or see what's going on especially you know coming from the population that I deal with; my daughter is non-verbal, that's the only way I have.

Gary: Right. Well this is Gary, I think you've got a good point and I think it's probably the case that most programs allow visitors but the orientation of the questions is "Does it occur a lot? Do you encourage it?" etc and it's a slightly different orientation on the question. That seems like it might smack of do you allow visitors? And I don't know of anyone who restricts family members from coming and going at will but...

John: This is John. I think we want to be careful because some of these things are already in place. I think we need to be careful not to over think this because the fact is is that anybody can come visit us anytime they want and there's just a process to do that like DuPont. You check in, you sign in, you-- if you're going on the floor you generally have somebody go with you but that's more so that something doesn't occur around you but my point is they're already-- these processes already exist and I would not suggest that they go away.

Teri: This is Teri and they do exist for you, and they do exist for you but they do exist everywhere and that's what we're looking at right now.

Gary: Right, this is Gary, I agree. I think it is important to have some of those questions that seem like softballs that are in there because it helps the collective understanding of what the expectation is for settings. Some organizations may be silent on those things, some organizations may actually have policies in practice that inhibit and we have to figure out what the appropriate balance is and I would assume that eventually probably sooner rather than later as in when we get into the-- I guess it's remediation, essentially DDDS is going to have to establish rules that govern or set forth the standards for Delaware pertaining to all of these issues and then it will become godified essentially.

Suzanna: This is Suzanna. So it seems to me that the answer to that is if it's yes, then that's fine and those of you who already have that in place that's fine and if it's no then that's when it's going to probably go to remediation after the look behind or even before, but as Teri said, some places don't but apparently everyone at this table does so... Some of the conversation would be because we only do things in the community we have no facility at the ark. So I'm trying to

listen and be sensitive to what you all are talking about thought are your issues.

Gary: Right well, this is Gary, but if I'm not mistaken your largest supporting employment component is an environment where people would not be able to just walk in.

Suzanna: That's absolutely correct. That's absolutely correct.

Gary: Right so you do have issues, the same issues that the rest of us do.

Suzanna: But that's not our facility.

Gary: But for supported employment that's going to be the picture across the board. So within supported employment it is a germane question and it's not-- it's descriptive, it's not qualitative or at fault. It's what it is because that's the nature of the employment setting.

Brian: This is Brian. So this is something that Katina and I spent some time talking about yesterday. We had a hard time especially because the services that she and I provide are out in the community and so the term setting we felt like often was the wrong term to use especially for the kinds of supports and services that we're providing because we're actually providing services. The setting where the services are being offered are somebody else's setting. It's an employment facility that has it's own set of rules on visitors and things like that and so from one setting to another that can have different rules about what is and isn't allowed because of the nature of that business. So we struggled just with the term setting even though we understand why it's there, but anyway I just wanted to put that out there because it's something I think-- I mean in my mind this is I guess I struggle with the use of the word setting when we're talking about supportive employment because in most cases that's often about the services that are being offered not the setting where they take place.

Gary: This is Gary. I understand what you're saying but I think there are a range of-- there is a range of how ideal supported employment settings are and therefore I think there are some pertinent issues because some of those settings are more and less integrated in reality. So I think it is pertinent although you know I think in the final analysis, individual supported employment is going to be it is what it is and thank goodness we'll be able to find job opportunities and you know we might as well not pay much attention to supported employment to tell you the truth because that's not where the focus of this is but there are some qualitative differences from one supported employment setting to another and I think we should be looking at that.

John: This is John. Along with supportive employment piece, 90% of the supportive employment services provided are in group settings because of the nature of the folks that we work with so having said that they may be a division of a division within a company. So I'm thinking of one setting we have at Citibank where part of the accounting department and part of the QA process, but the work they do within the larger group and they have access to the launch areas but the group they do or the work they do is as a group in the QA process. So that would be a setting that would not fit the individual definition yet they're paid by the company and you know all the

other pieces that go with being competitively employed. So I think settings can apply to a supportive employment piece depending on how you deliver that service.

Gary: It's a stretch to use that terminology because it seems to be out of context.

Teri: Because-- this is Teri-- I do think that that would fit into the setting rule where you know you have a group and they're in a company and they have access to whatever the other employees have.

John: But the function of the work is actually with each other within the setting as they feed other's work.

Teri: And we do have -- this is Teri-- yeah we do have for group settings, we do have some-- I think, don't we?

John: Yeah there are guidelines there. There are clear guidelines for group settings.

Teri: Yeah.

Suzanna: Okay Gary...

Gary: If you can go all the way to the bottom and I won't belabor this because we've already spent a bunch of time on it. I was going through the same part there it is-- it went past. I just sketched out some partial suggestions and thoughts about our response set. Now imagine we're going to run into problems if the response set isn't the same between day service and residential. We're probably going to have a train wreck. So we can suggest conceivably that our ideas around these might be applied you know to all of the assessment tools. So anyway that's for future reference like I said substantially in compliance. Basically what I'm suggesting is that the judgments be made for the setting as a generality and that's accepting the notion that there may be some individual deviations as supported by EoP's but that the environment in which the service is provided is in compliance with the notion of the settings rule. It's not 100% because there are individual deviations as supported by EoP's. So basically that goes to mechanics of-- you know I don't even know if that's-- it's probably not going to be our responsibility but I think yes and no is insufficient. There's too much subjectivity and grey.

Suzanna: This is Suzanna. Teri is it your thinking that Medicaid-- Delaware Medicaid is going to come up with the final version of the assessment tools?

Teri: Yes. We are making recommendations.

Suzanna: So this will-- and I'm assuming I think we're all in agreement that we need some sort of quantitative at the end that says whether or not they are in substantially in compliance. Does everyone agree with that?

Brian: This is Brian. With what?

Suzanna: With summing it up at the end as Gary did?

John: This is John. You're looking for a quantitative measurement that determines whether or not you're in compliance or not. Is that what you're suggesting?

Suzanna: No, just that we do at the end say whether or not it is. I'm not sure how we come up with that determination and it's not going to be up to us anyway.

Teri: This is Teri. I'm not sure-- does it belong there or does it belong with the look behind and the evidence? That's what I'm not sure about. I mean do we just do a yes no and then in the look behind and the evidence then we get the reasons why?

John: Yeah this is John, I agree. I think that's probably where you want to see it.

Suzanna: Gary, this is Suzanna-- I'm asking Gary his...[laughing] sorry. Because he put this here so I thought he might want to respond to it.

Gary: It looks good.

[Group Laughing]

Female Speaker: He was doing candy crush.

Female Speaker: I think that the only reason that Gary put this there was to, and I don't mean to speak for you but my understanding from you was that this was there as a suggestion to how we set up the questions. It just happened to come at the end of the document. You weren't necessarily suggesting we need a section at the end of our survey instrument to say, 'Yes we believe we're substantially in compliance'.

Gary: Right. In the items I presented they were the response sets that were in the preexisting tools and I found them confusing, inconsistent and inadequate. I think we need to replace them with something else. Brian and Katina did essentially the same thing and so we've got different options on the table for how to achieve that. So that's one of the options or food for thought.

Female Speaker: Sorry, just a question. So how many-- and you can tell me this group isn't supposed to do this but how many like 'no, not substantially in compliance' responses do you have before you require a look behind and remediation? Is it one, is it two, is it something-- do you have what? Do you guys create a question bank or do you --like what's the pass fail?

Teri: Yeah, this is Terri. I think we...[Phone message talking over speaker: Please press any key to remain in conference]

Gary: We can turn that off.

Female Speaker: Thank you.

Gary: This is Gary. You know, as you start looking at the questions that's the first thing that comes to mind. What does the score card end up looking like? I did see one instrument that came through in the latest batch that did have some kind of score at the end and I didn't have a chance to digest it but it's kind of crazy to think that any numerical notion or scoring would have any meaning although you might have cardinal standards you know those that have to be satisfied no matter what and if you don't satisfy those, you don't pass go, you go straight to jail, etc. So I think that's a big question and all the more reason to keep things simple because if you have a laundry list of difficult to achieve philosophical standards, it's going to end up giving the impression that that setting's out of compliance and there's no basis for that because there's no waiting amongst these different items, etc. So it's kinda interesting. We're developing information that's going to go into the black hole and come back in who knows what form to which we'll have no input.

Suzanna: This is Suzanna. I think we probably ought to toss the process a little bit. Just saying.

Gary: Why?

[Laughing]

Suzanna: Well probably serves us well to do that. I mean why would we go into it with-- assuming that it's going to all end bad? You know, and then it seems like we're sort of wasting our time. Yeah okay.

Gary: What I was implying was that we have no basis for expectation of what the outcome will be.

Suzanna: Okay. Point taken. I think we want to talk about the timeline again. Gary are you finished?

Gary: Yes.

Suzanna: I'm sorry. I apologize.

Teri: I'm sorry Suzanna, and this is Teri again. Did we-- did everyone take a look at Hawaii? I thought Hawaii was very close to you know, they were the ones that actually assessed or had an assessment tool for day treatments specifically that we hadn't seen before.

Suzanna: Yeah and we do have on here to discuss Hawaii and Minnesota but I just sent those out yesterday so I didn't know if anyone had the opportunity to read them. I loved Hawaii. One of

the things I liked about it was when it really comes down to a self advocate doing it, they could-- the people I serve could work with this. So it appealed to me on that level. I understand that all the other ones are much more dense and have much more detail in them but pretty much the same questions just formatted a little bit differently. Did anyone here in the group-- I was going to say the same as we did this week, Lisa's going to collate all those things so we don't have duplicates between Brian, Katina and Gary and if we assign the rest of these- and I think Gary, did you bring up that we have to call it at some point and say we're not reviewing anymore states?

Gary: Yeah, for sure because you know the states are going to be nearing our process so these are going to be trickling in for months.

Suzanna: So is everyone in favor of calling it with Minnesota and Hawaii or do we want to wait one more week.

Teri: This is Teri. The only concern I have is we don't have a lot of day programs. If there's other things that for day-- whatever you call them-- if there's other things for day I'd like to see them. Maybe calling it quits on the residential, we don't need to look at them.

Suzanna: We're not actually.

Teri: Right, but we don't need them sent to us. We only need day programs sent to us; employment, those kind of things.

TC Bunk: I agree with Teri. This is TC Because we don't have that much. This is actually probably the first one I've found.

Suzanna: Okay so is that a group decision that we will continue reviewing whatever comes in from any source that is day service based? Is everyone-- everyone seems to be nodding agreement except perhaps Gary.

Female Speaker: Gary's on the phone again.

Gary: No, I'm not on the phone, I'm reading the Hawaii plan.

[Group Laughing]

Female Speaker: He's on the phone to Hawaii.

Lisa: This is Lisa. I have cleverly put it up here. Of course you can probably read it better.

[Laughing]

Lisa: I went ahead and put it up here if we want to have some discussion.

Teri: This is Teri. When I asked Jane these couple of other questions we have would you like me to ask her to please send us only day programs that come through?

Suzanna: This is Suzanna. I would say yes. She's sending things to me and I'm distributing them and I think she's already doing that but certainly it's worth reminding her about that because that's all I got this time.

Teri: Okay, good.

Suzanna: Okay.

Lisa: I do like this.

Suzanna: Yeah this is Hawaii.

Gary: This is Gary. One cautionary note-- we might want to keep in mind if we can track it somehow whether the examples we're looking at are part of a plan that's been approved by HP-- CMS because what's presented might be something that's crazy unacceptable to CMS and then we'd be down the wrong road.

Kimberly: This is Kimberly. CMS doesn't approve the assessments. The assessments are only CMAA/DDDS approve the tool. CMS my understanding reviews that you are in compliance at the end.

Gary: That makes sense.

Suzanna: So that eliminates that concern Gary? This is Suzanna.

TC Bunk: This is TC. So this is within the state then?

Female Speaker: Delaware approves it.

TC Bunk: And that's what Teri is saying. You're making recommendations for to pull together what they want to use as their final assessment which does not have to be approved by CMS.

Suzanna: Does everyone-- this is Suzanna-- does everyone understand that now?

Male Speaker: Yes.

Suzanna: Okay. So the Hawaii plan is up.

Brian: This is Brian and to be clear these questions are only about the day services right? It doesn't cover employment-- anything employment related or .

Lisa: This is Lisa. I think while we're just scanning these many of us-- but it looks like some of them could certainly apply to those services.

John: Yeah this is John. I saw the same thing too. My only question or comment about the plan is or about this questionnaire is, do we want to break it out so that those things applicable to the individual service but the service this one kind of runs broad spectrum from all the services you offer where you're going to have no's and yes's, it's a mix and would it make sense just to take something like this and break out the questions so that they apply to prevoc or dayhab or supportive employment and have the questionnaire that way. It's just a thought.

Suzanna: This is Suzanna. I think we go back and forth on whether or not we're doing four or one general one. Does anyone feel that we've solved that and locked into what we want to do? Brian's saying no. I feel like we go back and forth on that depending on which assessment we're looking at when whether or not it sort of covers everything. I think as a group we need to decide and move forward with that so that we're not continuously going back and forth otherwise we'll come up at the end and we'll still be deciding whether or not we want to-- four or one.

Brian: This is Brian. Do we want to take a vote at this point just to sort of see where everybody's at? Do we have enough information to conduct an exercise like that?

Suzanna: This is Suzanna. I think no. I think we still have one more week of reviewing information and at the end of next-- and I'll just put that on the agenda for next time to take a vote on one or four.

Brian: And even-- this is Brian-- so even if that isn't our final final decision at least it would give us a sense of where everybody was at.

Suzanna: Right.

Brian: It could be that everybody is in fact in agreement, we're just not aware.

John: This is John. In the spirit of keeping it simple, one of the things might be to just have a column on the thing that says not applicable so that if you're not looking at the dayhab program, you're in a program that's an NA and that would keep you from devising for different tools or four different questionnaires to do this.

Suzanna: This is Suzanna. I think no matter how we go we should have an NA column. That's my opinion. I think it's really important. It addresses the explain. Maybe we don't provide this service or maybe in this person centered plan this exists or whatever.

Gary: This is Gary. I generally agree with that but I can imagine some providers in the self assessment declaring that something's not applicable but the expectation of the system is that it is applicable. So I think we may have to predetermine some of the ones where it does and does not

apply to specific service types.

Suzanna: This is Suzanna. That's certainly one approach to take. I think another is that those things could be in the look behind also but either way I think we'll need to flesh that out a little more.

Brian: Just to piggy back off of Gary's point, this is Brian-- so I agree. I mean it could be that we identified there are some questions where NA is not an appropriate-- it is applicable no matter how they spin it and you might need to provide more information but there might be some items where NA just-- NA is NA.

Gary: This is Gary. One other aspect that I think we're going to have to provide for although I'm a little confused on this-- looking at the various tools I'm under the impression that we're going to have a real hard time avoiding the notion of what documents compliance. I don't think we can kick that down the road to a different group. I think we have to put it in here but we're-- Teri were you saying that we're not expected to define what the proof of compliance would be?

Teri: Well that would be evidence and we are expected to do that.

Gary: Okay that's what I thought.

Brian: For each question but not for the total sum of a determination of background.

Teri: Right.

Gary: Excellent. Okay thank you.

Teri: And I do see-- this is Teri-- in the employment part they're looking at day services but it has a part for employment. It says do you have a job? So you're either going to answer yes or no and then some of these questions under that would become not applicable right away.

Suzanna: Well, I'm sorry this is Suzanna.

Teri: Under Hawaii, page five.

Suzanna: Okay.

Gary: This is Gary. From some of the reading I've done I saw repeated references to if the individual has an employment goal then those standards would apply. So it's not only if they're employed, it's also if they have a goal to be employed but then some people don't have a goal for employment at all and those would be NA. So you know there's some tie in to the individual plan there.

Teri: And this is Teri, I'm just making a statement out there. Shouldn't we all have an

employment goal anyway?

John: Wow. This is John. I would tell you to read Hawaii. I think that would be true in prevocational and supportive employment situations but for instance in a dayhab unit where someone either may be medically involved or in fact maybe retired they're not going to have an employment goal.

Teri: And that's where it-- yeah that's where I can understand that. I do believe in a dayhab there are people there that can be employed, even medically you can be employed because we're saying that everyone can work but then when you throw the seniors in there they are people who are retired.

John: Well we're going back again to the point of choice. Within our program what they do with the Eop is to determine from the individual what kind of a program they want to be in and someone may actually choose to be in day habilitation program where it's activity driven and it's documented when it's cleared but again they would not have employment as a goal.

Teri: So then one of the questions may be where you're offered employment?

John: That's fair, yeah.

[Several talking at once]

John: Pardon me?

Teri: Are there opportunity ...

John: Yeah, right.

Female Speaker: When we have a governor who says everyone can work but the senior section, that's what...

Brian: This is Brian, I see your point Teri. So it sounds like we're saying the same too, so certainly not just for those who are working but also for those who are involved in prevocational services and predetermination, being able to access those services that you have employment goals and prevocational services certainly you would have...

John: Well and everyone in a prevoc program should have an employment goal. I mean if you've chosen prevoc, somewhere in there you should be working on what's going to get you out and out to work. Back to your other piece that Teri-- there's another piece that another group of folks that enlists an agency we're starting to experience at a younger age which is we have folks in early stages of Alzheimer's, dementia, where that choice is not being made for the team as well. So again, these are nuances, I understand, but they're nuances I think we have to pay attention to as well.

Brian: This is Brian. That also gets back to the idea that Gary was offering the substantially in compliance kind of consideration. Where the large majority of individuals are you know, receiving services.

Female Speaker: Right.

Lisa: Well this is Lisa. You may also have a legal guardian that says I am choosing dayhab and not employment for the person that I am their legal guardian.

John: You have-- this is something for us to start with as providers but we have legal guardians who say I want my child in prevoc but don't send them off to work and that becomes a whole new set of struggles where a parent is saying that for whatever reason-- you have one parent who has a child who's abused on the job years ago and apparently had an emotional breakdown from that and is adamant do not send that person out to work and every EoP we sit and have that conversation.

Suzanna: This is Suzanna. I think if you look in the final rule of the person centered piece of that, the final rule from CMS in the person centered piece whether we like it or not I believe they recognize the guardian as making that decision and I think that's-- we have to follow unless we're gonna-- I know Teri that really grates on you but we are following the CMS rules not our own personal opinion on that and it is in the CMS ruling that the guardian is recognized as making that decision.

Teri: But-- this is Teri-- but we're still asking the person whether they want to work or not, whether they have a guardian or not, correct? I mean we're not saying we're going to make them work, we're not going against the guardian.

John: The answer to your question is yes.

Teri: Right.

John: The example I gave you is the individual has experienced the desire to work but we also have law suits and liability issues and we send that person out and something happens to them...

Teri: I understand. Now one question John, what about the people that are-- that say at times the parents have felt like they've been out a few times, they just can't do it and that they're safer working right there.

John: The-- again during the EoP process we again we encourage the parents to understand that 10 unsuccessful attempts of employment isn't a lifetime of unsuccessful attempts and generally we can convince parents to go along unless there's a traumatic or catastrophic event that occurred such as the one I just described, this person's never going to back down but I think it's imperative on us as it's-- particularly in a prevocational site as people provide services that if

that's the case that we continue to push for that. The option would be, and we've said this to parents and actually some have made this decision, then your child shouldn't be in a prevocational program they should be in a day habilitation program and they can do the things within the day program. We have had parents make that choice, but again it's about the options, the choice, the whole process taking place.

Suzanna: And then these will be the exceptions as-- this is Suzanna--as Gary has brought up and Brian has reinforced that we don't expect this to be the norms. It should be the exception to the...

Teri: And this is Teri, I think that's part of a look behind when they go to John or they go to jobs and they say, you're out of compliance you have this many people and John says, well I have these guardians who say-- and there's this evidence.

[Group] Right.

Suzanna: So that makes it a very circular situation when you can answer you know where nothings left out there. There really doesn't seem to be the need for anything to be left out without an explanation or an answer. Okay.

Gary: This is Gary. Are we still on Hawaii? Are we going to talk about Minnesota or?

Suzanna: Well I-- this is Suzanna.

Gary: Or are we going to for go it?

Suzanna: What would you like to do? I thought we should assign Minnesota and Hawaii and I still have to do dissapid and break out the questions from those, give them to Lisa, and on our next meeting that would be the discussion points. Does anyone have any thoughts on that? Okay. That's what we'll do then. Again who would like to take Hawaii, Minnesota? I'm still doing dissapid but I'd like to that with someone.

TC Bunk: I'd like to do Hawaii.

Male Speaker: I'd like to go to Hawaii.

[Group laughing]

Suzanna: Okay TC do you want to do that on your own?

TC Bunk: Yeah.

Suzanna: Okay. Minnesota. Volunteers for Minnesota? Brian's raising his... Oh I think that was in the transcript from last time that you raised your eyebrows.

Female Speaker: Yeah it was.

Gary: It was. You know every time you raise your eyebrows people take that as an indication of volunteering.

[Female laughing]

Suzanna: That's absolutely correct. Okay.

Teri: Brian, I'll work with you if you'd like.

Brian: I volunteered?

[Group laughing]

Teri: I'd be glad to help you.

Suzanna: Okay, Teri and Brian will do Minnesota.

Brian: And then-- this is Brian. So I will also and I say this with my eyebrows raised, at initial glance Hawaii and Minnesota do seem substantially different than the other ones that we've reviewed so I really encourage everybody to review those and not just rely on the recommendations that we bring back versus those that I did this past coming year. You know those are-- those questions were quite similar. It looks like Hawaii and Minnesota are very different from things that we've been looking at.

Teri: So this is Teri. So we actually could all review and then all come back and give our...

Suzanna: Right and this is Suzanna. A reminder to send if possible in advance to Lisa so that she can be ready to put them up. Lisa is going to collate so that those things that have already been done are not duplicate questions that we will distill it to one question.

Gary: This is Gary. Looking at Hawaii and Minnesota since they're both specifically day programs there's no reason to extract the items. They automatically go on the list. The discussion amounts to other features like Minnesota has a response set that has to do with will be in compliance by January of 17, that's a whole different concept that's probably beyond our purview but the individual items presumably germane to day services so we can put them on the list without waiting for you know -- I don't know that there's any individual representative review process necessary for these because they're already in the pool of day service questions. So we should all read them. They aren't that long and they do present some very different approaches to some of the issues, particularly Minnesota. They get into some numerical notions of what's compliance.

TC Bunk: This is TC. On the Hawaii one what's so different I think is that-- because we had

talked a great length about how there isn't really a yes and a no, there's going to be other reasons, explanations, and Hawaii just has yes and no like--

Suzanna: This is Suzanna. I think we know that format may not work.

TC Bunk: Right so we can change that.

Suzanna: But the style of it we all seem to embrace that.

Teri: And this is Teri and I think I did say when we go back and do the look behind and the evidence that's when we'll flesh out the yes and no's if someone seems very in compliant they're going to go there and ask the questions as to why and that's when you're going to... And then when we come up with the evidence we will have those kind of things like John talked about in the evidence.

Suzanna: Okay I have-- this is Suzanna. We've already discussed the agenda for the next meeting. I think it's time to ask if there's any public comment from those here who are not a part of the committee?

Female Speaker: I just wanted to add volunteerism. That's something that volunteer slots are offered in many agencies.

Female Speaker: I think in the Hawaii and the employment it says do you volunteer.

Female Speaker: Okay.

Female Speaker: Because in the big definition of work...

Female Speaker: Yeah I was just saying is often seniors that volunteer but they don't wish to work every day.

Female Speaker: Right. I understand that.

Female Speaker: Although there's a situation, I wish I had the specifics on it, Delaware I believe there was a group of people who were employed who were paid and I think it was a facility setting and that facility was closed, they lost their paid job and were moved to another setting where now they do the same thing or a similar job as volunteers which was a step down for them. They wanted to be paid. I'm sorry I don't have specifics for you but I found that disturbing.

Female Speaker: Is that the one that went down to the river front?

Female Speaker: Yeah, so do you remember?

Female Speaker: Servicers?

Female Speaker: It wasn't servicers. So that was a change. So I would guess those people weren't very happy about that. I mean they enjoyed getting their pay check in their facility and then they were sent to do a similar job and not be paid at all.

Suzanna: Okay and I'm not sure if that in any way fits in to our assessment.

Female Speaker: I'm just saying it's a situation I as a citizen find unfortunate.

Suzanna: Point taken.

Female Speaker: And I don't know where it goes in there. It just popped into my head, sorry.

Suzanna: Okay. Okay, I think we're done. Are we ready to adjourn or does anyone else have anything else? Then I'll say we're adjourned at 11:45. We'll see you next week.

Female Speaker: Thank you.

Male Speaker: Thanks.

[Group talking]

Suzanna: Please keep your blue card. Bring them with you.

[Group talking over each other]

Suzanna: Does anyone have the sign in board?